

DCFS FAIR LABOR STANDARDS ACT (FLSA)
STATEMENT OF AGREEMENT OR UNDERSTANDING

Re: Compensation for Overtime Work

I, _____, understand that agencies of the [State of Louisiana](#) have the option of granting compensatory leave for overtime hours worked.

NON-EXEMPT EMPLOYEES: In cases where the Fair Labor Standards Act applies, such leave will be credited to non-exempt employees at the rate of one and one-half hour for each hour worked. For overtime hours worked during the weeks when leave is taken (with or without pay), or when holidays are observed, the agency may opt to use straight-time cash payments or hour-for-hour compensatory leave to compensate non-exempt employees, in accordance with the Rules of the Department of State Civil Service.

EXEMPT EMPLOYEES: Agencies have the option of granting no overtime compensation at all to exempt employees; but if the agency chooses to compensate exempt employees for overtime, the agency may choose to compensate such employees with compensatory leave at the hour-for-hour rate rather than cash payment.

PAYMENT OF COMPENSATORY LEAVE UPON SEPARATION:

* **NON-EXEMPT EMPLOYEES:** I understand that non-exempt employees shall be paid upon separation for any time and one-half compensatory leave earned for overtime, as required by the Fair Labor Standards Act. I also understand in accordance with DCFS Policy No. 4-15 unused compensatory leave earned at the straight time rate by non-exempt employees shall be paid upon transfer or separation from the department.

* **EXEMPT EMPLOYEES:** Upon separation or transfer from a department, any compensatory leave earned at the time and one-half rate and credited to an employee prior to becoming an exempt employee shall be paid according to the method of calculation of hourly rate contained in the Fair Labor Standards Act, including those payments made under this rule to exempt employees. In accordance with DCFS Policy No. 4-15 unused compensatory leave earned at the straight rate by exempt employees will not be paid upon transfer or separation from the department. The unused leave will be canceled and will not be recredited upon reemployment.

I have read the above and agree to accept compensatory leave as compensation for overtime work.

Printed or Typed Name: _____

Signature: _____ Date: _____